

Certain antidepressants more effective in treating youth anxiety disorder, analysis shows

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For children and adolescents who require medication to treat anxiety, there are two primary classes of antidepressants that are prescribed: selective serotonin reuptake inhibitors (SSRIs) and selective serotonin-norepinephrine reuptake inhibitors (SNRIs).

Now, University of Cincinnati (UC) research, published online ahead of the April issue of the *Journal of the American Academy of Child and Adolescent Psychiatry* shows for the first time that SSRIs may be the more effective option.

"For a long time there had been this sense that SSRIs work better than the SNRIs in treating anxious youth, but there wasn't clear evidence to back this up, so we wanted to put that notion to the test," says Jeffrey Strawn, MD, associate professor in the Department of Psychiatry and Behavioral Neuroscience at the UC of Cincinnati College of Medicine, and lead author on the study.

"What we found is that with the SSRIs, compared to SNRIs, people get better faster and see greater improvement overall. There had been some suggestion of this in some individual studies, but this is the first to evaluate the magnitude and trajectory of treatment, or in other words, how much and how quickly people get better."

For the meta-analysis, UC researchers compiled the data from nine

[randomized controlled trials](#). Strawn partnered with Jeffrey Welge, PhD, research associate professor of psychiatry, and econometricians Jeffrey Mills and Beau Sauley at the Lindner College of Business who created a model to examine two things: how quickly the patients got better and by how much.

The models showed that patients started to see improvements from [medication](#) around two weeks, with the more significant improvement occurring in the fourth week of treatment. Strawn says it was also important to look at [medication dosage](#) to find out whether the dose of the medication affected improvement.

"We saw that [dosage] didn't necessarily affect how much the patients improve, but it did affect how quickly they get better," says Strawn, indicating that a higher dosage helped this.

Jeffrey Mills, PhD, an associate professor in the Department of Economics at the Lindner College of Business, and Sauley, a doctoral student, used statistical analysis common in economic modeling to apply it to the clinical data.

"We have very complementary skill sets, so interdisciplinary research of this nature is a great example of work that could not be accomplished by any one author," says Mills. "Everyone's contributions results in more robust research that none of us would be able to produce alone."

Mills' particular expertise is in Bayesian statistical inference and modeling. "As an econometrician, I have mostly applied these tools to analyzing economic data, so it is refreshing and exciting to get to apply my expertise to a different field like psychopharmacology," he says.

Strawn says one significant aspect of this study lies in the fact that it may be immediately applicable to clinical practice.

"In research, many findings impact our work in the clinic years down the road, but this type of work potentially changes how we select medications to treat children and adolescents with anxiety disorders today," he adds.

More information: Jeffrey R. Strawn et al, The Impact of Antidepressant Dose and Class on Treatment Response in Pediatric Anxiety Disorders: A Meta-Analysis, *Journal of the American Academy of Child & Adolescent Psychiatry* (2018). [DOI: 10.1016/j.jaac.2018.01.015](https://doi.org/10.1016/j.jaac.2018.01.015)

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